



CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: <u>08/26/2008</u> To: <u>10/19/2008</u> <div style="text-align: center; font-size: small;">Mo Day Year Mo Day Year</div>	
<p>1. Committee I.D. Number 150331</p> <p>2. Committee Name Committee to Elect Vaughn J. Begick Commissioner</p>	<p>4. Candidate Last Name First Name M.I. Begick Vaughn</p> <p>4a. Office Sought Including District # or Community Served (If applicable) 3rd Dist Bay Co</p> <p>4b. County of Residence Driver License # (Optional) Bay</p>
<p>5. Committee's Mailing Address 522 N Madison</p> <p>Bay City MI 48708 Area Code and Phone (989) 894-5007</p> <p style="font-size: x-small;">If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</p>	<p>6. Treasurer's Name & Residential Address John Nyquist 311 N Grant</p> <p>Bay City MI 48708 Area code & Phone (989) 894-5394 Driver License # (Optional)</p>
<p>7. Treasurer's Business Address 522 N MADISON AVE</p> <p>Bay City MI 48708 Area Code and Phone (989) 894-5007</p>	<p>8. Designated Recordkeeper's Name and Mailing Address (If the committee has a Designated Recordkeeper) Margie Begick 5353 Lorraine Court</p> <p>Bay City MI 48706 Area Code and Phone (989) 686-0578 Driver License # (Optional)</p>
<p>9. TYPE OF STATEMENT</p> <div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><p>9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p><p>Pre-Election or Post-Election Statement relates to:</p><div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><p><input type="checkbox"/> Primary</p><p><input type="checkbox"/> Convention</p><p><input type="checkbox"/> Special</p></div><div style="width: 45%;"><p><input checked="" type="checkbox"/> General</p><p><input type="checkbox"/> School</p><p><input type="checkbox"/> Caucus</p></div></div><p>Date of Election, Convention or Caucus <u>11/04/2008</u> <div style="text-align: center; font-size: x-small;">Month Day Year</div></p></div><div style="width: 50%;"><p>9c. <input type="checkbox"/> Annual Statement (Coverage Year)</p><p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)</p><p>9e. <input type="checkbox"/> Dissolution of Candidate Committee Effective Date of Dissolution <div style="text-align: center; font-size: x-small;">Mon Day Year</div></p><p style="font-size: x-small;">By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p></div></div>	
<p>A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.</p>	
<p>10. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="width: 45%;"><p>Current Treasurer or Designated Recordkeeper <u>John Nyquist</u> Type or Print Name</p><p>Candidate <u>Vaughn Begick</u> Type or Print Name</p></div><div style="width: 45%; text-align: center;"><p> Signature</p><p> Signature</p></div><div style="width: 10%; text-align: center;"><p>Date <u>10-22-2008</u> Mo Day Year</p><p>Date <u>10/19/2008</u> Mo Day Year</p></div></div>	

Authority granted under P.A. 388 of 1976



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>1895.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>0.00</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>1895.00</u>	(18.) \$ <u>12543.59</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>655.37</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>1895.00</u>	(20.) \$ <u>13198.96</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0.00</u>	(21.) \$ <u>125.67</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>2492.44</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>2492.44</u>	(23.) \$ <u>12207.21</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0.00</u>	(24.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>1719.63</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + <u>1895.00</u>	
	(15.) = <u>3614.63</u>	
15. SUBTOTAL Add Lines 13 and 14		
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - <u>2492.44</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>1122.19</u> *	

NOTE: Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000.00 Reporting Waiver threshold.
All required schedules must be included with this statement. *If your ending balance is negative, please recheck your math.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>1</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/15/2008</u> Name: <u>Robert Appold</u> Address: <u>5529 Christyway</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	10.00	30.00
3. Contribution # <u>2</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/15/2008</u> Name: <u>Melba Hoerauf</u> Address: <u>6201 S Three Mile</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	45.00
3. Contribution # <u>3</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/15/2008</u> Name: <u>Elaine Pahl</u> Address: <u>424 Hotchkiss Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20.00	40.00
3. Contribution # <u>4</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/2008</u> Name: <u>Roy Schairer</u> Address: <u>103 Parkwood Court</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>CPA</u> Employer <u>Weinlander Fitzhugh</u> Business Address <u>1600 Center Ave</u> <u>Bay City MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00	200.00
Page Subtotal	105.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



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CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

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3. Contribution # <u>5</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2008</u> Name: <u>Gwen Bakus</u> Address: <u>156 Salzburg Rd</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	130.00
3. Contribution # <u>6</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2008</u> Name: <u>Leona Blohm</u> Address: <u>2275 S. Fraser Road</u> <u>Kawkawlin MI 48631</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>7</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2008</u> Name: <u>Nancy Kendall</u> Address: <u>2616 Delta Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	33.00
3. Contribution # <u>8</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2008</u> Name: <u>Robert Klimmek</u> Address: <u>2922 Engelhardt Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	81.00
Page Subtotal	85.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
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Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>9</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/17/2008</u> Name: <u>Peg Rowley</u> Address: <u>P.O. Box 1115</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	75.00
3. Contribution # <u>10</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Earl Mast</u> Address: <u>522 N. Madison</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	45.00
3. Contribution # <u>11</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/18/2008</u> Name: <u>Scott Sturm</u> Address: <u>1017 Pine Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20.00	40.00
3. Contribution # <u>12</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/22/2008</u> Name: <u>Howard Helmreich</u> Address: <u>2727 Ziegler Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal	95.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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3. Contribution # <u>13</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/22/2008</u> Name: <u>Roy G Schwab</u> Address: <u>3218 Old Kawkawlin Rd</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00	130.00
3. Contribution # <u>14</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/25/2008</u> Name: <u>Mary Jane Gregory</u> Address: <u>264 Jennison Place</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	55.00
3. Contribution # <u>15</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/30/2008</u> Name: <u>Eleonore Begick</u> Address: <u>5828 S. 4 Mile Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	110.00
3. Contribution # <u>16</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Rick Ahlberg</u> Address: <u>714 S Birney</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	87.50
Page Subtotal	125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
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Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>17</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Alivin Applod</u> Address: <u>6243 S. 3 Mile Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>18</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Eldor Appold</u> Address: <u>2301 E. Htchkiss</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	86.00
3. Contribution # <u>19</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Marcia Bacon</u> Address: <u>2481 Old Bridge</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	73.00
3. Contribution # <u>20</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Jeremy Begick</u> Address: <u>4607 Three Mile Rd</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	71.00
Page Subtotal	125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
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Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>21</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Norbert Begick</u> Address: <u>6242 3 Mile Road</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	133.00
3. Contribution # <u>22</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Paul Begick</u> Address: <u>5852 S. 4 Mile Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Nursery Owner</u> Employer <u>Begick Nursery</u> Business Address <u>1112 Bay Road</u> <u>Bay City MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	217.50
3. Contribution # <u>23</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Vaughn Begick</u> Address: <u>5353 Lorraine Court</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Physician Assistant</u> Employer <u>Dr James LaFleur</u> Business Address <u>3400 N Center Rd</u> <u>Saginaw MI 48603</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	70.00	389.59
3. Contribution # <u>24</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Nathan Bickel</u> Address: <u>715 South Sheridan. St.</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	52.50
Page Subtotal	170.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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3. Contribution # <u>25</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: Robert Bloenk Address: 231 Jennison Place Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	87.50
3. Contribution # <u>26</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: Arlene Bush Address: 2100 Eleventh St Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Harris Bush Realty</u> Business Address <u>311 Center Bay City MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	107.50
3. Contribution # <u>27</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: Carlene Dardas Address: 1680 N Jones Rd Essexville MI 48732 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>28</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: Joseph Davis Address: 909 N Wenona Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation <u>Insur Sales</u> Employer <u>DuRussell Ins.</u> Business Address <u>3741 E Wilder Rd Bay City MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	130.00
Page Subtotal	85.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>29</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Gene Engerer</u> Address: <u>1401 Delta Rd.</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	73.00
3. Contribution # <u>30</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Bill Fournier</u> Address: <u>1020 N. Water</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	75.00
3. Contribution # <u>31</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Pat Gorzenski</u> Address: <u>2700 Envergreen Drive</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>32</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Joel Gougeon</u> Address: <u>241 Donahue Beach</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>lobbyist</u> Employer <u>Joel Gougeon</u> Business Address <u>241 Donahue Bch Rd</u> <u>Bay City MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	150.00
Page Subtotal	150.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>33</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Jason Gower</u> Address: <u>4630 S. Flajole</u> <u>Midland MI 48642</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Self Employed</u> Employer <u>Jason Gower</u> Business Address <u>306 Fifth St</u> <u>Suite 302</u> <u>Bay City MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	185.00
3. Contribution # <u>34</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Mary Jane Gregory</u> Address: <u>264 Jennison Place</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>P. A.</u> Employer <u>Adrian Sharemeta M.D.P.C.</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	105.00
3. Contribution # <u>35</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Jospeph III Gwizdala</u> Address: <u>1354 N. Union</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	50.00
3. Contribution # <u>36</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Robert Hill</u> Address: <u>1501 Smith St.</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal	125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>37</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: Robert Horn Address: 414 Nebobish Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	15.00	43.00
3. Contribution # <u>38</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: David Huiskens Address: 88 Tobico Beach Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>39</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: Art Joitke Address: 4244 Two Mile Rd. Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	55.00
3. Contribution # <u>40</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: Karen Karbowski Address: 727 Bay Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal	90.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>41</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Matthew Lance</u> Address: <u>306 S. Johnson</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Supervisor</u> Employer <u>MPA Group LTD</u> Business Address <u>1217 S Euclid Ave</u> <u>Bay City MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	148.50
3. Contribution # <u>42</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Keith Markstrom</u> Address: <u>1383 N. Jones</u> <u>Essexville MI 48732</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Fundraiser</u> Employer <u>Bay Regional Medical Center</u> Business Address <u>1900 Columbus Ave</u> <u>Bay City MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	150.00
3. Contribution # <u>43</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Earl Mast</u> Address: <u>522 N. Madison</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	70.00
3. Contribution # <u>44</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Elaine McPhail</u> Address: <u>2567 1/2 E. Hotchkiss</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	142.50
Page Subtotal	125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>45</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: Kurt Miller Address: 5030 Two Mile Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	32.50
3. Contribution # <u>46</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: William Miller Address: 1642 Townline Rd. Auburn MI 48611 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	42.50
3. Contribution # <u>47</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: Nelson Niederer Address: 5402 Elmview Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	72.50
3. Contribution # <u>48</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: John Nyquist Address: 311 N. Grant Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	82.50
Page Subtotal	95.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>49</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Dennis R. Poirier</u> Address: <u>1265 Orchard Road</u> <u>Essexville MI 48732</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	88.00
3. Contribution # <u>50</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Adam Reddick</u> Address: <u>4012 Eleven Mile Road</u> <u>Auburn MI 48611</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	42.50
3. Contribution # <u>51</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Bob Sarow</u> Address: <u>1111 N. Water St. #201</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>52</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>James Sharrard</u> Address: <u>2314 Groveland</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal	105.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>53</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>David Shore</u> Address: <u>3309 State St.</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>54</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Richard Somalski</u> Address: <u>1630 N. Southeast Boutell</u> <u>Essexville MI 48732</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner-nurseryman</u> Employer <u>Bay Landscaping</u> Business Address <u>1630 N Southeast Boutell</u> <u>Essexville MI 48732</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	250.00
3. Contribution # <u>55</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/02/2008</u> Name: <u>Michael Wooley</u> Address: <u>412 N. Johnson</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	92.50
3. Contribution # <u>56</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2008</u> Name: <u>Loraine Diment</u> Address: <u>6226 Fairway pines Ct #2</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20.00	70.00
Page Subtotal	115.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>57</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2008</u> Name: <u>Carolyn Van Cise</u> Address: <u>2351 Coralinn Court</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	75.00	83.00
3. Contribution # <u>58</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/07/2008</u> Name: <u>Scott Parrent</u> Address: <u>314 Deens Lane</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	65.00
3. Contribution # <u>59</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2008</u> Name: <u>Armond Beiser</u> Address: <u>6597 S. 3 Mile Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00	110.00
3. Contribution # <u>60</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2008</u> Name: <u>Laurie Bush</u> Address: <u>1402 Helen St</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	100.00
Page Subtotal		175.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>61</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2008</u> Name: <u>Bruce Douglas</u> Address: <u>4622 Mocasa Ct</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>62</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2008</u> Name: <u>Vernon W. Kuch</u> Address: <u>5343 Three Mile Rd</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>63</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/08/2008</u> Name: <u>Marsha Voisine</u> Address: <u>5967 Red Feather Dr</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>64</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/09/2008</u> Name: <u>Ross Whitman</u> Address: <u>3027 Canterbury Dr</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	193.50
Page Subtotal		90.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>65</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/15/2008</u> Name: <u>Helen Woods</u> Address: <u>1200 McKinley</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	10.00	67.50
3. Contribution # <u>66</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/17/2008</u> Name: <u>Cynthia Smith</u> Address: <u>3400 N Center Rd</u> <u>Saginaw MI 48603</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal		35.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)		1895.00

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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 1 Name: Sawicki & Son Address: 1521 W. Lafayette Detroit MI 48216 <input type="checkbox"/> Fund Raiser	Purpose: <u>signs</u> Expenditure Code <u>SA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	08/30/2008	200.00
Expenditure # 2 Name: Sawicki & Son Address: 1521 W. Lafayette Detroit MI 48216 <input type="checkbox"/> Fund Raiser	Purpose: <u>signs</u> Expenditure Code <u>SA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/04/2008	192.20
Expenditure # 3 Name: U.S. Postal Service Address: Washington Avenue Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>stamps</u> Expenditure Code <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/04/2008	84.20
Expenditure # 4 Name: Reimold Printing Corporation Address: 3201 Hallmark Court Saginaw MI 48603 <input type="checkbox"/> Fund Raiser	Purpose: <u>ck#1057-brochures</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/18/2008	859.48
Expenditure # 5 Name: Stein Haus Address: 1108 N Water St Bay City MI 48708 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>ck#1058-food,etc</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/02/2008	409.96
Subtotal this page			1745.84
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 6 Name: U.S. Postal Service Address: Washington Avenue Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>stamps</u> Expenditure Code <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/02/2008	84.00
Expenditure # 7 Name: U.S. Postal Service Address: Washington Avenue Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>ck#1060-stamps</u> Expenditure Code <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/03/2008	149.45
Expenditure # 8 Name: Bay County Right to Life Address: 314 S Jackson Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>ck#1063-tickets</u> Expenditure Code <u>TP</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/12/2008	350.00
Expenditure # 9 Name: Reimold Printing Corporation Address: 3201 Hallmark Court Saginaw MI 48603 <input type="checkbox"/> Fund Raiser	Purpose: <u>ck#1062-Absentee Voter maili- ng</u> Expenditure Code <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/12/2008	63.15
Expenditure # 10 Name: Al Eichhorn Address: 2240 Weiss st Saginaw MI 48602 <input type="checkbox"/> Fund Raiser	Purpose: <u>ck#1065-ad work</u> Expenditure Code <u>BA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/15/2008	100.00
Subtotal this page			746.60
Grand Total of all Schedules 1B (Complete on last page of Schedule)			2492.44

Enter this total
on line 8a of
Summary Page



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

- USE A SEPARATE SHEET FOR EACH EVENT-

3. Date Event Was Held <u>10/02/2008</u> Month Day Year	4. Number of Individuals Attending or Participating (whichever is greater) 45	5. Type of Fund Raising Activity Fundraiser	6. Address and Name (If any) of the place where the activity was held Stein Haus - 10/02/08 1108 N Water St Bay City MI 48708 <input type="checkbox"/> Private Residence
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7. Total Contributions of \$20.00 or less 85.00
8. Total Contributions of \$20.01 or more 1105.00
9. SUBTOTAL (Add lines 7 and 8) 1190.00
10. Other Receipts 0.00
11. Gross Receipts (Add lines 9 and 10) 1190.00
12. Total Cost of Event* 409.96

*Includes In-Kind Contributions and All
Expenditures Made For the Event

13. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.